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Fill in this info	rmation to identify your	case:		
Debtor 1	Marisa D Kleinot			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		FEDERAL BANKRUPTO	CY EXEMPTIONS	
Case number	19-24755			
(II KIIOWII)				

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

info	es complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amender original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	470,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,106.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	492,106.00
Par	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	369,380.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	70,233.00
	Your total liabilities	\$	439,613.00
Par	t 3: Summarize Your Income and Expenses	•	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,886.14
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,792.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Marisa D Kleinot Case number (if known) 19-24755

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____10,454.59

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this informa	ation to identify your case:	
Debtor 1	Marisa D Kleinot	
Debtor 2 (Spouse, if filing)		
United States Ba	inkruptcy Court for the: FEDERAL BANKRUPTCY EXEMPTIONS	
Case number	19-24755	Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106I	MM / DD/ YYYY

Schedule I: Your Income

12/15

For Debtor 2 or

For Debtor 1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

art 1: Describe Employment			
Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	Branch Manager	Driver
Include part-time, seasonal, or self-employed work.	Employer's name	Wells Fargo	United Parcel Service, Inc.
Occupation may include student or homemaker, if it applies.	Employer's address	2433 Corlies Ave. Neptune, NJ 07753	55 Glenlake Parkway NE Atlanta, GA 30328
	How long employed ti	here? 19 Years	1 1/2 Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 8,092.98 \$ 3,842.24

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 1,478.58

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106l Schedule I: Your Income page 1

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Debt	tor 1	Marisa D Kleinot	_	С	Case number (if kno	own)	19-24	755		
					For Debtor 1		For I	Debtor	2 or	ı
									pouse	
	Сор	y line 4 here	4.		\$ 8,092	.98	\$	5,	320.82	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 1,493.	.20	\$	1,	011.83	
	5b.	Mandatory contributions for retirement plans	5b.			.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		. —	.00	\$		159.64	_
	5d.	Required repayments of retirement fund loans	5d.		\$ 806.		\$		0.00	_
	5e.	Insurance	5e.			.54	\$		0.00	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.		·	.00	\$		0.00	_
	5g. 5h.	Other deductions. Specify: Health Care Flex Spending	5g. 5h.		·	. <u>00</u> .67			52.74 0.00	_
	011.	Wage Garnishment	_ '''			.00	` \$ <u> </u>		671.67	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$ 2,801.		\$		895.88	-
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$ 5,291.		\$		424.94	=
8.		all other income regularly received:					· —			-
0.	8a.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.			.00	\$		0.00	_
	8b.	Interest and dividends	8b.	•	\$0	.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ 0.	00	\$		0.00	
	8d.	Unemployment compensation	8d.		·	.00	\$ 		0.00	_
	8e.	Social Security	8e.		,	.00	\$—		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance			<u> </u>	.00	·_		0.00	-
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$ 0.	.00	\$		0.00	
	8g.	Pension or retirement income	_ 8g.		·	.00	\$		0.00	_
	8h.	Other monthly income. Specify: Estimated Tax Refund Pro-Rated	8h.			.67			0.00	-
9.	Δdd	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	— 9.	\$			\$		0.0	-
٥.			-	Ľ						
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	5,461.20	+ \$	3,4	24.94	= \$	8,886.14
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								,
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		•			chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						12.	\$	8,886.14
									Combine month!	ned y income
13.	Do y	you expect an increase or decrease within the year after you file this form	?							
		No. Yes. Explain:								

Official Form 106l Schedule I: Your Income page 2

	in this informa	tion to identify yo	our case:			1		
Deb						Char	k if this is:	
Debi	tor 1	Marisa D Kle	einot				k if this is: An amended filing	
Deb	tor 2					_	· ·	ving postpetition chapter
(Spc	ouse, if filing)							the following date:
Unite	ed States Bankr	ruptcy Court for the	: FEDER	AL BANKRUPTCY EXEM	PTIONS	_	MM / DD / YYYY	
		-24755						
(If kr	nown)							
Of	fficial Fo	rm 106J						
		J: Your	Exper	1989				12/15
Be a	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta ry questio	. If two married people ar ich another sheet to this				or supplying correct
Part 1.	t 1: Descr Is this a joir	ibe Your House	hold					
••	■ No. Go to	line 2.						
			ın a separ	ate household?				
		_	st file Offic	ial Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debt	or 2.	
2			_	iai i oiiii 1000 2, 2xpoiiooc	Tor Coparato Floado	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	01 2.	
2.	•	e dependents?	☐ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the					_	□ No
	dependents	names.			Daughter		7	■ Yes
					Son		9	□ No ■ Yes
								□ No
								☐ Yes
								□ No
•	D							☐ Yes
3.		enses include f people other t	han _	No				
	• • • • • • • • • • • • • • • • • • • •	d your depende		Yes				
Part	t 2: Estim	ate Your Ongoi	ng Month	ly Expenses				
Esti	imate your ex	penses as of y	our bankr	uptcy filing date unless yet is filed. If this is a supp				
				government assistance i				
	value of sucl ficial Form 10		d have in	cluded it on Schedule I: \	our Income		Your exp	enses
4.		or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgage	e 4. \$		2,470.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	•	rty, homeowner's				4b. \$		0.00
				upkeep expenses		4c. \$		100.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loops	4d. \$ 5. \$		0.00 500.00
J.	Auditional	nongaye payiii	cinco ioi y	our residence, such as no	me equity loans	υ. φ		500.00

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Debt	or 1 Marisa	a D Kleinot	Case number (if know	n) 19-24755
i.	Utilities:			
		ity, heat, natural gas	6a. \$	550.00
		sewer, garbage collection	6b. \$	100.00
	,	one, cell phone, Internet, satellite, and cable services	6c. \$	465.00
	6d. Other. S		6d. \$	0.00
		usekeeping supplies	7. \$	650.00
		d children's education costs	8. \$	1,357.00
			9. \$	·
	•	ndry, and dry cleaning	· ——	230.00
		e products and services	10. \$	100.00
		dental expenses	11. \$	0.00
		on. Include gas, maintenance, bus or train fare.	12. \$	533.33
		e car payments.	·	
		nt, clubs, recreation, newspapers, magazines, and boo		200.00
		ontributions and religious donations	14. \$	86.67
	Insurance.	incurrence deducted from your pay or included in lines 4	or 20	
	15a. Life insu	e insurance deducted from your pay or included in lines 4	or 20. 15a. \$	0.00
			·	0.00
	15b. Health i		15b. \$	0.00
	15c. Vehicle		15c. \$	250.00
		nsurance. Specify:	15d. \$	0.00
	Taxes. Do not Specify:	t include taxes deducted from your pay or included in lines	s 4 or 20. 16. \$	0.00
		r lease payments:		
		ments for Vehicle 1	17a. \$	500.00
	17b. Car pay	ments for Vehicle 2	17b. \$	0.00
		Specify: Non Debtor Spouse Credit Card #1	17c. \$	100.00
	17d. Other. S	Specify: Non Debtor Spouse Credit Card #2	17d. \$	600.00
		nts of alimony, maintenance, and support that you did m your pay on line 5, <i>Schedule I, Your Income</i> (Officia		0.00
		nts you make to support others who do not live with		0.00
	Specify:	,, ,	19.	0.00
		operty expenses not included in lines 4 or 5 of this for		9.
		ges on other property	20a. \$	0.00
	20b. Real es		20b. \$	0.00
		y, homeowner's, or renter's insurance	20c. \$	0.00
		nance, repair, and upkeep expenses	20d. \$	0.00
		wner's association or condominium dues	20d. \$	
			- · · · · · · · · · · · · · · · · · · ·	0.00
•	Other: Specify	у:	21. +\$	0.00
	Calculate vou	ur monthly expenses		
		s 4 through 21.	\$	8,792.00
		e 22 (monthly expenses for Debtor 2), if any, from Official		<u> </u>
				0.700.00
	ZZC. Add line 2	22a and 22b. The result is your monthly expenses.	\$	8,792.00
	Calculate you	ur monthly net income.		
		ne 12 (your combined monthly income) from Schedule I.	23a. \$	8,886.14
	. ,	our monthly expenses from line 22c above.	23b\$	8,792.00
		, ,	· ·	
	23c. Subtrac	ct your monthly expenses from your monthly income.		
		sult is your monthly net income.	23c. \$	94.14
	For example, do modification to the	ct an increase or decrease in your expenses within the pyou expect to finish paying for your car loan within the year or do the terms of your mortgage?		ncrease or decrease because of
	No.			

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Fill in this info	rmation to identify your	case:		
Debtor 1	Marisa D Kleinot			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	sankruptcy Court for the:	FEDERAL BANKRUPT	CY EXEMPTIONS	
Case number	19-24755			
(if known)	10 2-1100			■ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below		
Did you pay or agree to pay someone wh	s NOT an attorney to help you fill out bankruptcy forms?	
No		
Yes. Name of person	Attach Bankruptcy Petition Preparer's Declaration, and Signature (Official F	
Inder penalty of perjury, I declare that I had they are true and correct. X /s/ Marisa D Kleinot	e read the summary and schedules filed with this declaration and	
v 131 Mai isa D Kiciliot	X	
Marisa D Kleinot Signature of Debtor 1	Signature of Debtor 2	